

**Must be filed with the Board of Selectmen within six months from date of Notice.**

State Tax  
Form 129

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF ANDOVER

Received

DO NOT WRITE IN THIS SPACE

WARD \_\_\_\_\_ PAGE \_\_\_\_\_ LINE \_\_\_\_\_

**APPLICATION FOR ABATEMENT OF BETTERMENT TAX**

☐ Sewer    ☐ Sidewalk    ☐ Street    ☐ Water

20\_\_\_\_

**To the Board of Selectmen**

NAME OF APPLICANT.....

POST-OFFICE ADDRESS.....

The above-named person aggrieved by a 20..... **BETTERMENT TAX** hereby applies for an abatement.

NAME OF PERSON ASSESSED.....20.....

**Location and Description of Property** – No. of Street, Plan, or Lot, and Area of Land.

Description must be sufficiently accurate to identify the premises.

.....

.....

Betterment.....Tax Assessed \$.....Amount Paid \$.....

Tax Paid by.....on.....,20.....

**IF THE APPLICANT IS NOT THE PERSON ASSESSED**, what is the applicant's interest in the Property?

.....

**SPECIFY: PRESENT OWNERSHIP, MORTGAGE OR WHAT OTHER INTEREST**

When was such interest acquired?.....

DATE

Complete statement of reasons for this application:.....

.....

If lot is vacant do you hereby request a deferral of the betterment?.....

**CONTENTIONS OF LAW RAISED**

.....

.....

SUBSCRIBED THIS.....day of....., 20....., UNDER THE PENALTIES OF PERJURY.

SIGNATURE OF APPLICANT.....

NAME IN FULL

**THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR TAX. IT SHOULD BE PAID AS ASSESSED. REFUND WILL FOLLOW IF ABATEMENT IS ALLOWED.**